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MAY - 9 200/

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Date: May 9, 2007

"Ber Monthership Other Than Virgin

FACSIMILE COVER LETTER

Facsimile Number: 571-273-8300

To:

Examiner J. Joo

Group Art Unit 2154, USPTO

From:

Mr. John R. Mattingly

MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C.

Re:

USSN 10/083,356

Attorney Docket No.: H-1037

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

Transmittal:

Amendment;

Petition for Extension of Time for one month;

Credit Card Payment Form in amount of \$120.00 in payment of one month extension of time.

Reg. No. 30,293

May 9, 2007

Date

Total Number of Pages (including cover sheet):

Form PTO-1083

Patent

In RE application of

M. KAGEYAMA et al

COMMUNICATION METHOD FOR MESSAGE

INFORMATION BASED ON NETWORKI

Case Docket No. H-1037

OR

OR

extension of time fee

RECEIVED

Serial No.:

10/083,356

Group Art Unit: 2150ENTRAL FAX CENTER

For:

Examiner: J. Joo

MAY - 9 2007

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

...

Transmitted herewith is an Amendment in the above-identified application.

Small entity of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(C	ol. 2)	(Col. 3)	
	Claims Remaining After Amendment		Pre	lest No. viously id For	Present Extra	
Total	12	Minus	**	20	3	
Indep.	2	Minus	***	3	-	
First presentation of Multiple Dependent Claims						

SMALL ENTITY				
Rate	Additional Fee			
X 25	\$			
X 100	\$			
X 180	\$			
Total	\$			

OTHER THAN A SMALL ENTITY				
Rate	Additional Fee			
X 50	\$			
X 200	\$			
X 360	\$			
Total	\$			

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in col. 3.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write '20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write '2" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

ليا	Please charge my Deposit Account No. 50-1417 in the ar	mount of \$
	A Credit Card Payment Form in the amount of \$ 120.00	is attached for one month

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayments to Deposit Account No. 50-1417.

 \boxtimes Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

X Any patent application processing fees under 37 CFR 1.17.

冈 Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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Date: May 9, 2007

John R. Martingly, Attorney for Applion